

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/620,826
		Filing Date	Jul 21, 2000
		First Named Inventor	Majidi-Ahy, Reza
		Art Unit	2616
		Examiner Name	Jones, P.
Total Number of Pages in This Submission	5+	Attorney Docket Number	164.1017.01

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> Alter Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO Form SB08A Copies of References Return Postcard
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Steven A. Swernofsky	Reg. No. 33,040
Signature	/Steven A. Swernofsky/	
Date	November 19, 2007	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
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Signature	/Dede Stolee/	Date	November 19, 2007

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003 Patent fees are subject to annual revision

☐ Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$180.00)

Complete if Known

Application Number	09/620,826
Filing Date	7/21/2000
First Named Inventor	Majidi-Ahy, et al.
Examiner Name	Jones, P.
Art Unit	2616
Attorney Docket No.	164.1017.01

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account

Deposit Account Number

50-0365

Deposit Account Name

Swernofsky Law Group PC

The Director is authorized to: (check all that apply)

☒ Charge fees(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
	1001	790	2001	395		Utility filing fee	
	1002	350	2002	175		Design filing fee	
	1003	550	2003	275		Plant filing fee	
	1004	790	2004	395		Reissue filing fee	
	1005	200	2005	100		Provisional filing fee	

SUBTOTAL (1) (\$0.00)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
	1202	50	2202	25		Claims in excess of 20	
	1201	200	2201	100		Independent claims in excess of 3	
	1203	360	2203	180		Multiple dependent claim, if not paid	
	1204	200	2204	100		**Reissue independent claims over original patent	
	1205	50	2205	25		**Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$0.00)

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
	1051	130	2051	65		Surcharge - late filing fee or oath	
	1052	50	2052	25		Surcharge - late provisional filing fee or cover sheet	
	1053	130	1053	130		Non-English specification	
	1812	2,520	1812	2,520		For filing a request for ex parte reexamination	
	1804	920*	1804	920*		Requesting publication of SIR prior to Examiner action	
	1805	1,840*	1805	1,840*		Requesting publication of SIR after Examiner action	
	1251	120	2251	60		Extension for reply within first month	
	1252	450	2252	225		Extension for reply within second month	
	1253	1,020	2253	510		Extension for reply within third month	
	1254	1,590	2254	795		Extension for reply within fourth month	
	1255	2,160	2255	1,080		Extension for reply within fifth month	
	1401	500	2401	250		Notice of Appeal	
	1402	500	2402	250		Filing a brief in support of an appeal	
	1403	1,000	2403	500		Request for oral hearing	
	1451	1,510	1451	1,510		Petition to institute a public use proceeding	
	1452	500	2452	250		Petition to revive - unavoidable	
	1453	1,500	2453	750		Petition to revive - unintentional	
	1501	1,400	2501	700		Utility issue fee (or reissue)	
	1502	800	2502	400		Design issue fee	
	1503	1,100	2503	550		Plant issue fee	
	1460	130	1460	130		Petitions to the Commissioner	
	1807	50	1807	50		Processing fee under 37 CFR 1.17(q)	
	1806	180	1806	180		Submission of Information Disclosure Stmt	\$180.00
	8021	40	8021	40		Recording each patent assignment per property (times number of properties)	
	1809	790	2809	395		Filing a submission after final rejection (37 CFR 1.129(a))	
	1810	790	2810	395		For each additional invention to be examined (37 CFR 1.129(b))	
	1801	790	2801	395		Request for Continued Examination (RCE)	
	1802	900	1802	900		Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$180.00)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Steven A. Swernofsky	Registration No. (Attorney/Agent)	33,040	Telephone	650-947-0700
Signature	/Steven A. Swernofsky/			Date	November 19, 2007

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